## **Revised Manifest Summary Report**

## TOYOTA MOTOR SALES TOYOTA MOTOR SALES

| Manifest Date | Bates# | Manifest# | Quantity | Units | Gallons | Code | # Trips | Assessed (gl) Volume |  |
|---------------|--------|-----------|----------|-------|---------|------|---------|----------------------|--|
| 12/14/1990    |        | 88681573  |          | 1880  | LBS     |      | CMP     |                      |  |

Total Records: 1

Default Volume: 0

Total Waste Volume: .94

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

A INSERM HAZARDOLS 1. Generator's US EPA ID

## See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Toxic Substances Control Division Sacramento, California

| · · · · · · · · · · · · · · · · · · ·  |                             | A. Sta                                  | of is not<br>te Manifest Docu        |  | by Federal law   |
|--|-----------------------------|---|--------------------------------------|--|------------------|
| 3 TOYOTA MOTOR SALES<br>19001 S. WESTERN AVE., TORRANCE, CA 9050   | 9                           |   |                                      | Value of the latest and the latest a | 1573             |
| 4. Generator's Phone ( 714 562-3163  |                             | B. Sta                                  | te Generator's E                     |  |                  |
| 5. Transporter 1 Company Name 6. US EPA ID Number  |                             | C. Sta                                  | te Transporter's                     | ID / :   | 012              |
| OMEGA RECOVERY SERVICES CAD 042 245 001  | 1-1-1                       | A War war and the state of              | nsporter's Phone                     |  | 698-0            |
| 7. Transporter 2 Company Name 8. US EPA ID Number  |                             | ジェアングラ アンチ                              | le Transporter's                     | CONTRACTOR OF THE PERSON OF TH |                  |
| 9. Designated Facility Name and Site Address 10. US EPA ID Number  | Щ.                          | 100000000000000000000000000000000000000 | nsporter's Phone<br>te Facility's ID | HTD) IT II   |                  |
| 9. Designated Facility Name and Size Address OMEGA RECOVERY SERVICES 10. US EPA ID Number 12504 E. WHITTIER BLVD   |                             | 9                                       | APIOHI                               | 21214  | STADIL.          |
| WHITTIER, CA 90602 CAD 042 245 00  | 1                           | H. Fac                                  | ility's Phone                        |  | TO THE STATE OF  |
|  | 12. Cont                    |   | 213 69                               | 8-09   |                  |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)   | No.                         | Туре                                    | Quantity                             | 14.<br>Unit<br>Wt/Vol  | ).<br>Waste      |
| * WASTE REFRIGERANT GAS NOS, NONFLAMMABLE  |                             |   | ż                                    | 1417.40  | 341              |
| GAS IN 1078 (R-11)   | -4                          |   | 1 40                                 | 1  | 5899             |
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| d.   |                             |   | 2                                    |  | State            |
|  |                             | ļ                                       | ŧ                                    |  | EPA/Other        |
| J. Additional Descriptions for Materials Listed Above  |                             |   | dling Codes for 1                    |  |                  |
|  |                             | c.                                      | O)                                   | d.   |                  |
| 4  | 1.7                         |   |                                      | Page 1   |                  |
| GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are and are classified, packed, marked, and labeled, and are in all respects in proper condition for national government regulations.  | and toxicity                | of wester                               | y according to a                     | pplicable<br>a degrae  | I have determine |
| If I am a large quantity generator, I certify that I have a program in place to reduce the volume to be economically practicable and that I have selected the practicable method of treatment, a present and future threat to human health and the environment; OR, if I am a small quantity generation and select the best waste management method that is available to me and that I can   | nerstor I he                | ve made                                 | a good faith effe                    | 31-10 mm   | imize my waste   |
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EPA 8700-22 (Rev. 9-88) Previous editions are obsolete.

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To: P.O. Box 3000, Sacramento, CA 95812

State of California—Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-91)

## See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Toxic Substances Control Division Sacramento, California

| WASTE MANIFEST CAX 000, 2  |  | Vanifest<br>sument No.                                       | 2.                     | Page 1<br>of                           |                  |                                  | he shaded are<br>by Federal la  |
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| 4. Generator's Phone ( 714 562-3163  |  |  | 8. St                  | nte General                            | or's E           |                                  |   |
| 5. Transporter 1 Company Name 8.   | US EPA ID Number   |  | C 80                   | nte Transpo                            |                  |                                  |   |
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| 7. Transporter 2 Company Name 8.   | US EPA ID Number   |  | E. St                  | ile Transpo                            | rter's !         | D 213                            | 030   |
|  | 111111   | 111  | F. Tra                 | neporter's                             | Phone            |                                  |   |
| 9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 10.   | US EPA ID Number   | ****   |                        | te Facility                            |                  | 40                               | Transact H  |
| 12504 E. WHITTIER BLVD   |  |  | C                      | Cility's Pho                           | HI               | 21214                            | 1200  |
| WHITTIER, CA 90602 C   | AD 042 245 00  | )1   |                        | 213                                    |                  | 8-09                             | 91  |
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